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	Application Number	10/722,691				
اور 2 8 کارور کارور AMENDMENT	Application Title	Associative Database Scanning And Information Retrieval				
PANISMITTAL	Filing Date	November 24, 2003				
FORM	First Named Inventor	Indeck et al.				
, , , , , ,	Art Unit	2162				
	Examiner Name	Fleurantin, Jean B.				
Total Number of Pages in This Submission	Attorney Docket Number	53047/44791				
Total Number of Pages III This Submission						
	ENCLOSURES (Check all t					
Fee Determination Record Transmittal Form	Amendment	Other Enclosure(s) (please identify below):				
	After Final	Request for Continued Examination (RCE)				
Fee Attached	Affidavits/declarations(s)	Transmittal with required fee (duplicate) Return Postcard				
The Commissioner is hereby authorized to charge the fee of	Extension of Time Request					
in this application to a  Deposit Account20-0823	If an extension or an additional					
The Commissioner is hereby	extension of time is required, but is not enclosed, please consider this					
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required, or credit any over- payment, to Deposit Account	accordingly					
Number <u>20-0823</u> I	Information Disclosure Statement					
have enclosed a duplicate copy of this sheet.	with three references and transmittal (duplicate)					
Any additional filing fees	Certified Copy of Priority					
required under 37 C.F.R. 1.16.	Document(s)					
Any patent application	Drawing(s)					
processing fees under 37 C.F.R. 1.17.	Petition					
	Terminal Disclaimer					
Firm Name	TURE OF APPLICANT, ATTORNE	Y, OR AGENT				
Thompson Cob	ourn LLP					
2	Signature B_ZCalt.					
Printed name Benjamin L. Vo	ılk, Jr.					
Date 10/25/2	2005 Reg. N	o. 48,017				
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## of the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application or Docket Number** PATENT FEE DETERMINATION RECORD 53047/44791 Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FEE (\$) RATE (\$) RATE (\$) NUMBER FILED NUMBER EXTRA FEE (\$) FOR **TOTAL CLAIMS** OR 0.00 74 minus 20 = 54 0.00 (37 CFR 1.16(i)) INDEPENDENT CLAIMS 15 minus 3 = 12 0.00 0.00 (37 CFR 1.16(h)) \$1,387.00 **TOTAL** \* If the difference in column 1 is less then zero, enter "0" in column 2 **TOTAL** 0.00 AMENDMENTS AS FILED OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS **HIGHEST** RE. REMAINING RATE (\$) NUMBER PRESENT RATE (\$) ADDI-ADDI-**AFTER** PREVIOUSLY TIONAL TIONAL **EXTRA** CHON FEE (\$) AMENDMENT FEE (\$) PAID FOR Total OR 46 Minus 0 (37 CFR 1.16(i)) 74 区 Independent OR 6 (37 CFR 1.16(h)) Minus 15 0 EST Application Size Fee (37 CFR 1.16(s)) $\overline{\mathbf{z}}$ OR N/A FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) N/A TOTAL TOTAL 0.00 ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ⋖ RATE (\$) RATE (\$) **NUMBER PRESENT** ADDI-ADDI-**AFTER** PREVIOUSLY TIONAL TIONAL **EXTRA** ENDMENT AMENDMENT FEE (\$) FEE (\$) PAID FOR Total Minus 74 0 OR (37 CFR 1.16(i)) Independent 6 Minus 15 0 OR (37 CFR 1.16(h)) Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) N/A OR N/A TOTAL TOTAL 0.00 OR ADD'L FEE ADD'L FEE

		(Co	lumn 1)		(Co	lumn 2)	(Colu	ımn 3)
AMENDMENT B		REM	AIMS IAINING FTER NDMENT		NU PRE	GHEST IMBER VIOUSLY ID FOR		SENT TRA
	Total (37 CFR 1.16(i))	*	83	Minus	**	74	11	9
	Independent (37 CFR 1.16(h))	*	9	Minus	***	15	=	0
⋛	Application Size Fee (37 CFR 1.16(s))							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							

RATE (S	\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
x 25.00	0 =	225.00	OR	х =	
x	=		OR	х =	
N/A	`		OR	N/A	
TOTAL ADD'L FEI	E	\$225.00	OR	TOTAL ADD'L FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

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<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1